Telangiectases in Children, in Association with Wasting and Protracted Diarrhea.—FEARNSIDES (*British Journal of Dermatology*, February, 1912) reports a series of 6 cases, all in children, in which telangiectases, erythema, and purpura occurred in connection with wasting and protracted diarrhea. The erythema was present in all the cases and in 5 was associated with telangiectases. Purpura occurred in 2 along with the erythema and telangiectases. The erythema was found usually on the distal portions of the extremities, while the telangiectases were on the thighs and parts of the trunk exposed to pressure. Edema was present in all the cases. Fearnsides concludes that these various rashes were the expression of vascular dilatation, and were the direct result of the wasting brought about by the prolonged diarrhea.

Some Papulosquamous Syphilides and Their Relation to Psoriasis and Parapsoriasis.—RAVOGLI (*Archiv f. Dermatologie und Syphilis*, Band cxi, Heft 1), under the above title, discusses the not infrequent close resemblance existing between some papulosquamous syphilides and psoriasis, and reports briefly some cases in illustration. He concludes that in some instances psoriasis follows syphilis as a metamorphosis of the papular process. In some cases it is a hybrid form to be referred to an attenuated luetic taint; and although not the direct result of syphilis, it can, in many instances, be regarded as a parasyphilitic affection. (We cannot agree with some of Ravogli's conclusions as to the relationship between syphilis and psoriasis. There is no evidence to prove that the two diseases are even remotely related etiologically.—M. B. H.)

The Treatment of Darier's Disease by the Röntgen Ray.—RITTER (*Dermatologische Woch.*, Band liv, No. 6) reports a case of Darier's disease successfully treated by means of the Röntgen ray. In the beginning of the treatment small doses were employed (3 to 5 *x*), but without result. Larger doses (10 *x*) were then tried, and to these the affection reacted very promptly, the hyperkeratoses disappearing without leaving any scar. Gradually the greater part of the body was exposed to the rays, the result of the treatment being especially brilliant on the face, which was greatly disfigured by hyperkeratoses. The treatment lasted about eighteen months, and Ritter believes the good results permanent.

Eosinophile Cells and "Mastzellen" in Vesicular Eruptions of the Skin.—PULTZ (*Arch. f. Dermatologie u. Syphilis*, Band cxi, Heft 1), who has studied a large number of cases of various vesicular eruptions such as eczema, scabies, herpes, etc., has found a considerable number of eosinophile cells and "mastzellen" in the vesicles of these diseases. In most scabies vesicles and in those of eczema eosinophiles and "mastzellen" were found together, the number of the former, however, greatly exceeding the latter. In the lesions of herpes labialis and progenitalis there was a high-grade eosinophilia and a marked increase in the number of "mastzellen," but in those of 2 cases of herpes zoster neither variety of cell was found. In the lesions produced by vesicants there was likewise a high-grade eosinophile and basophile leukocytosis.

PATHOLOGY AND BACTERIOLOGY

UNDER THE CHARGE OF
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A Partly Successful Therapy for Cancer.—A preliminary communication of great interest was recently made to the Medical Society of Berlin upon this subject by Wassermann, Keysser, and Michael Wassermann. It forms the subject of an article in the *Deutsch. med. Woch.*, December 21, 1911, and of a leader in the *Brit. Med. Jour.*, January 6, 1912. These workers have been seeking a remedy that would exert a selective action upon neoplastic tissues leading to the destruction of those tissues without effect upon the normal body cells, and have met with a partial success in a compound of selenium, tellurium, and eosin. No particulars of its exact qualitative or quantitative nature are to hand, but it may be said that the use of a large dose has led to the dwindling and sometimes to the disappearance of carcinomatous growths in laboratory animals. The growths experimented upon were in some cases transplantation, and in others spontaneous tumors; the curious statement appears that if the required dose be injected into a healthy animal the entire skin of the animal becomes pink (from the eosin), whereas, if a newgrowth be present this does not occur, but the tumor becomes an intense red, indicating a special affinity between the drug and the tumor cells. Tumors as large as a cherry have disappeared under the treatment.

Inflammatory and Arteriosclerotic Kidney Disease.—J. F. Gaskell (*Jour. of Path. and Bact.*, January, 1912), working at Freiburg, contributes a paper containing the results of a painstaking examination of more than 60 kidneys. He concludes that the glomerular and arterial changes give a means of differentiating certain forms of disease that is accurately in keeping with the clinical history of the cases. Among inflammatory cases Gaskell segregates those in which the renal change accompanies ulcerative endocarditis, indicating them as embolic focal nephritides; in these a characteristic fibrinous exudate and leukocytic infiltration affecting some of the glomerular capillaries is found. In such cases, the renal affection is a secondary one and the patient dies from the disease of the heart, and not from uremia, as is likely to happen in the true glomerulotubular cases which are readily separated from the above by the microscopic changes. Permanent inflammatory changes, apart from those seen in ulcerative endocarditis, are always due to true glomerulotubular nephritis, the effects of which are to be seen in different stages, the acute, known generally as acute parenchymatous nephritis, the subacute commonly called "large white kidney," and the sclerotic, usually known as secondary contracted kidney, less well designated "small white kidney." In general, Gaskell supports the views of Löhlein. The renal changes due to general vascular disease mark an entirely distinct group, which includes those due to senile arteriosclerosis and those in which a true primary contracted kidney, due to arteriosclerosis of the small arteries, are seen. In the former, the senile form, the arteriosclerosis is mainly seen in the aorta and other large vessels, whence it spreads to the renal arterioles, with marked atrophy and glomerular degeneration. Although a high degree of shrinkage may occur, death usually is due to intercurrent disease, and clinically the group is an unimportant one. The latter form, where there is seen a genuine contracted kidney, is seen in cases where a general, well-marked arteriosclerosis of small arteries and arterioles leads to death from such a cause as cerebral hemorrhage.

The Causative Agent of Scarlet Fever.—Much activity has lately prevailed in attempts to convey to monkeys the virus of scarlet fever; prominent among workers have been CANTACUZÈNE, BERNHARDT, VIPOND, LANDSTEINER, LEVADITI and PRASEK. Vipond holds for the causative agent a large, readily-cultivated bacillus. The three authors, last named, inoculated into the tonsils and under the skin, scarlatinal products and produced fairly satisfactorily the signs of the disease, but their animals showed blood cultures of streptococcus; the material does not produce symptoms unless inoculated into the tissues, and one is compelled to think that their experiments allow streptococci to complicate the results, although their own belief is that there are effects that can be attributed only to another virus. More definite, perhaps, are Bernhardt's results with material scraped from the tongues of patients, injected partly under the skin, partly in the mouth-tissues of an ape, of which the inguinal nods were then emulsified and injected. This was repeated, and the third ape, treated with emulsion that had been filtered through a Berkefeld filter, showed the exanthem, strawberry tongue, fever, subsequent desquamation, especially of the hands and feet, and occasional albuminuria. He thus thinks the disease to be due to a filterable virus, and appends a description of small bodies in the filtrate, which stain readily by Giemsa's method, and which he has found in the nodes and kidneys of individuals dead from the disease.

A Medium for Diphtheria Bacilli.—RANKIN (*Journal of Hygiene*, xi, 1911) has obtained very accurate results in the recognition of diphtheria bacilli by the use of a medium composed of sheep's blood serum, 3 parts; bouillon, 1 part; glucose, 0.5 per cent.; potassium sulphocyanide, 1 part; and 2 per cent. of a 5 per cent. solution of neutral red. The bacillus of diphtheria grows in rose-colored colonies, which are readily distinguished from the colonies of those few other microbes (chiefly cocci), the growth of which is not retarded by the medium.

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